

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Small PHA Plan Update
Annual Plan for Fiscal Year: 2001

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: Broken Bow Housing Authority

PHA Number: OK006

PHA Fiscal Year Beginning: (7/2001)

PHA Plan Contact Information:

Name: Frank Meddock

Phone: (580)584-6939

TDD: (580)584-6722

Email: bbow@pine-net.com

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ Main administrative office of the local, county or State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices

☐ OptionButton1

- ☐ Other (list below)

PHA Programs Administered:

☒ Public Housing and Section 8 ☐ Section 8 Only ☐ Public Housing Only

Annual PHA Plan Fiscal Year 2001

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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- ☐ Other (List below, providing each attachment name)

ii. Executive Summary

EXECUTIVE SUMMARY

The Broken Bow Housing Authority has prepared this Agency Plan in compliance with Section 511 of the Quality Housing and Work

Responsibility Act of 1998 and the ensuing HUD requirements.

We have adopted the following mission statement to guide the activities of the Broken Bow Housing Authority.

The mission of the Broken Bow Housing Authority is to be the area's affordable housing of choice. We provide and maintain safe, quality housing in a cost-effective manner. By partnering with others, we offer rental assistance and other related services to our community in a non-discriminatory manner.

We have also adopted the following goals and objectives.

Goal One: *Manage the Broken Bow Housing Authority's existing public housing programs in an efficient and effective manner thereby qualifying as at least a standard performer.*

Objectives:

1. HUD shall recognize the Broken Bow Housing Authority as a high performer by June 30, 2005.
2. The Broken Bow Housing Authority shall improve the turn around time by fast track processing of applications, also to make the units more serviceable to the community by adding air conditioners (a now competitive requirement) with an objective of obtaining 97% occupancy rate by June 30, 2005.
3. The Broken Bow Housing Authority shall promote a motivating work environment with a capable and efficient team of employees to operate as a customer-friendly and fiscally prudent leader in the affordable housing industry.

Goal Two: Continue to provide a safe and secure environment in the Broken Bow Housing Authority's public housing developments.

Objectives:

1. The Broken Housing Authority shall continue tight screening and monitoring and heading off crime before it happens in its developments so that the crime rate remains less than the surrounding neighborhood and continues to drop through June 30, 2005.
2. The Broken Bow Housing Authority shall refine the memorandum of understanding between the jurisdiction's police force and this agency. The purpose of this is to better define the "edge problem" of crime that occurs near our developments and develop strategies for identifying and reducing this problem.
3. Broken Bow Housing Authority shall reduce its evictions due to violations of criminal laws by 20% by June 30, 2005, through aggressive screening procedures.

Goal Three:

Expand the range and quality of housing choices available to participants in the Broken Bow Housing Authority's tenant-based assistance program.

Objectives:

1. Broken Bow Housing Authority shall establish a program to help people use it's tenant- based program to become homeowners by June 30, 2005.
2. Broken Bow Housing Authority shall achieve and sustain a utilization rate of 95% by June 30, 2005, in its tenant-based program.
3. The Broken Bow Housing Authority presently has 80 landlords who participate in the voucher program. The Housing Authority shall attract 10 new landlords who want to participate in the program by June 30, 2005.

Our Annual Plan is based on the premise that if we accomplish our goals and objectives we will be working towards the achievement of our mission.

The plans, statements, budget summary, policies, etc. set forth in the Annual Plan all lead towards the accomplishment of our goals and objectives. Taken as a whole, they outline a comprehensive approach towards our goals and objectives and are consistent with the Consolidated Plan. Here are just a few highlights of our Annual Plan:

- We have adopted three local preferences – for applicants who live or work in Broken Bow, for working families (seniors and people with disabilities automatically get this preference), and victims of domestic violence.
- We have adopted an aggressive screening policy for public housing to ensure to best of our ability that new admissions will be good neighbors. In our Section 8 program, we are screening applicants to the fullest extent allowable while not taking away the ultimate responsibility from the landlord. Our screening practices will meet all fair housing requirements.
- We have implemented a tenacious deconcentration policy.
- Applicants will be selected from the waiting list by preference an in order of the date and time they applied.
- We have established a minimum rent of \$50.00.
- We have established flat rents for all our developments
- In an attempt to encourage work and advancement in the workplace, and if the tenant or co-tenant is full time employed, we are not requiring interim recertifications if a resident or Section 8 participants have an increase in income. The increase will be reported at the next regular recertification.
- If the head of household is a full time student, the Housing Authority will give an 18% deduction on any earned income by the head of the household.
- If the head of the household is full time employed and the co-tenant is a full time student, the Housing Authority will not count any of the co-tenant's earned income.
- If the tenant is working 2 jobs and either job is considered full time (35 hrs), the Housing Authority will not count the earned income from the 2nd lesser job.
- The Housing Authority will not count earned income over 40 hours a week for the head of household.
- If the head of household is full time employed, the second wage earner's income will not count for one year. The Housing Authority will give double deduction of 36% after one year to the second wage earner.

In summary, we are on course to improve the condition of affordable housing in Broken Bow.

vi. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

There are no material changes in policies or programs.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. ☒ Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 225,000.00 (EST.)

C. ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

(2) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment C

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name:
1b. Development (project) number:

2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

- A. ☒ Yes ☐ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☒ Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family’s resources
- ☒ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- ☒ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

A. ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ _____

C. ☐ Yes ☒ No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

D. ☐ Yes ☒ No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are attached at Attachment F

3. In what manner did the PHA address those comments? (select all that apply)

☐ The PHA changed portions of the PHA Plan in response to comments

A list of these changes is included

☐ Yes ☐ No: below or

☐ Yes ☐ No: at the end of the RAB Comments in Attachment _____.

☒ Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in Attachment F.

☐ Other: (list below)

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: **State of Oklahoma**

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.

- ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☐ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
- ☐ Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

- ☐ Yes ☒ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

None

B. Significant Amendment or Modification to the Annual Plan:

None

Attachment A

Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers in Public Housing <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & self-sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
X	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program (section 2.50 of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
X	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

ATTACHMENT B

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Broken Bow Housing Authority		Grant Type and Number Capital Fund Program: <input checked="" type="checkbox"/> Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2001-2002
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	30000			
3	1408 Management Improvements				
4	1410 Administration	10810			
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	9325			
8	1440 Site Acquisition				
9	1450 Site Improvement	19600			
10	1460 Dwelling Structures	118675			
11	1465.1 Dwelling Equipment—Nonexpendable	14700			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	21890			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	225000			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Broken Bow Housing Authority		Grant Type and Number Capital Fund Program: X Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2001-2002
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)			
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
24	Amount of line 20 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)****Part II: Supporting Pages**

PHA Name: Broken Bow Housing Authority		Grant Type and Number Capital Fund Program #: X Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2001-2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	Operations	1406		30000				
	CIAP Coordinator-(Pro-Rated) Salary – including benefits – 12 hrs. a wk @ \$14.60 per hour x 52 wks.	1410.11		9110				
	Sundry: Phone, Postage, Advertisement, etc.	1410.19		1000				
	Audit Cost (Pro-Rated Share)	1410.12		700				
	CIAP Supervisor for Force Account Labor: 12 hrs. wk @ \$14.80 per hour x 52 wks.	1430		9325				
OK56P-006-001	Replace cracked & dislocated concrete in sidewalks & parking areas. Also replace areas of ponding water. 571 sq.ft @ \$7.	1450		4000				
OK56P-006-002	Replace cracked & dislocated concrete in sidewalks & parking areas. Also replace areas of ponding water. 571 sq.ft @ \$7.	1450		4000				
OK56P-006-001	Repair or replace 100 ft of sewer main @ \$8 per ft.	1450		800				
OK56P-006-002	Repair or replace 100 ft of sewer main @ \$8 per ft.	1450		800				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Broken Bow Housing Authority		Grant Type and Number Capital Fund Program #: X Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2001-2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
OK56P-006-001	Special accommodations in accordance with occupancy policy, 504 requirements & resident comments as listed in the annual plan (est.)	1450		3000				
OK56P-006-002	Special accommodations in accordance with occupancy policy, 504 requirements & resident comments as listed in the annual plan (est.)	1450		2000				
OK56P-006-003	Special accommodations in accordance with occupancy policy, 504 requirements & resident comments as listed in the annual plan (est.)	1450		2000				
OK56P-006-001	Replace trees and shrubs (ice storm)	1450		1000				
OK56P-006-002	Replace trees and shrubs (ice storm)	1450		1000				
OK56P-006-003	Replace trees and shrubs (ice storm)	1450		1000				
OK56P-006-001	Special accommodations in accordance with the occupancy policy & 504 requirements (est.)	1460		3000				

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)****Part II: Supporting Pages**

PHA Name: Broken Bow Housing Authority					Grant Type and Number Capital Fund Program #: X Capital Fund Program Replacement Housing Factor #:					Federal FY of Grant: 2001-2002			
Development Number Name/HA-Wide Activities		General Description of Major Work Categories			Dev. Acct No.		Quantity		Total Estimated Cost		Total Actual Cost		Status of Proposed Work
									Original	Revised	Funds Obligated	Funds Expended	
OK56P-006-002		Special accommodations in accordance with the occupancy policy & 504 requirements (est.)			1460				2000				
OK56P-006-003		Special accommodations in accordance with the occupancy policy & 504 requirements (est.)			1460				2000				
OK56P-006-001	Replace door hardware, light fixtures, vent hoods, smoke detectors, switches, receptacles, circuit breakers, etc., as needed	1460		16260									
OK56P-006-002	Replace door hardware, light fixtures, vent hoods, smoke detectors, switches, receptacles, circuit breakers, etc., as needed	1460		10840									

Annual Statement/Performance and Evaluation Report													
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)													
Part II: Supporting Pages													
PHA Name: Broken Bow Housing Authority					Grant Type and Number Capital Fund Program #: X Capital Fund Program Replacement Housing Factor #:					Federal FY of Grant: 2001-2002			
Development Number Name/HA-Wide Activities		General Description of Major Work Categories			Dev. Acct No.		Quantity		Total Estimated Cost		Total Actual Cost		Status of Proposed Work
									Original	Revised	Funds Obligated	Funds Expended	
OK56P-006-003	Replace door hardware, light fixtures, vent hoods, smoke detectors, switches, receptacles, circuit breakers, etc., as needed	1460		10840									
OK56P-006-001	Replace plumbing fixtures and hardware as needed	1460		4500									
OK56P-006-002	Replace plumbing fixtures and hardware as needed	1460		3000									
OK56P-006-003	Replace plumbing fixtures and hardware as needed	1460		3000									
OK56P-006-001	Replace heat & air in 20 units @ \$2000	1460		40000									
OK56P-006-001	Replace roof on 15 units @ \$1,549	1460		23235									
OK56P-006-001	Replace 6 water heaters @ \$250 (including labor & materials) as needed.	1465		1500									

Annual Statement/Performance and Evaluation Report													
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)													
Part II: Supporting Pages													
PHA Name: Broken Bow Housing Authority					Grant Type and Number Capital Fund Program #: X Capital Fund Program Replacement Housing Factor #:					Federal FY of Grant: 2001-2002			
Development Number Name/HA-Wide Activities		General Description of Major Work Categories			Dev. Acct No.		Quantity		Total Estimated Cost		Total Actual Cost		Status of Proposed Work
									Original	Revised	Funds Obligated	Funds Expended	
OK56P-006-001	Replace 6 ranges @ \$350	1465		2100									
OK56P-006-001	Replace 6 refrigerators @ \$450	1465		2700									
OK56P-006-002	Replace 4 water heaters @ \$250 (including labor & materials) as needed.	1465		1000									
OK56P-006-002	Replace 4 ranges @ \$350	1465		1400									
OK56P-006-002	Replace 4 refrigerators @ \$450	1465		1800									
OK56P-006-003	Replace 4 water heaters @ \$250 (including labor & materials) as needed.	1465		1000									
OK56P-006-003	Replace 4 ranges @ \$350	1465		1400									
OK56P-006-003	Replace 4 refrigerators @ \$450	1465		1800									

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)****Part II: Supporting Pages**

PHA Name: Broken Bow Housing Authority					Grant Type and Number Capital Fund Program #: X Capital Fund Program Replacement Housing Factor #:					Federal FY of Grant: 2001-2002			
Development Number Name/HA-Wide Activities		General Description of Major Work Categories			Dev. Acct No.		Quantity		Total Estimated Cost		Total Actual Cost		Status of Proposed Work
									Original	Revised	Funds Obligated	Funds Expended	
H.A. Wide	Upgrade maintenance equipment; mowers, weed eaters, chain saw, hedge equipment, upgrade one maintenance truck			1475		17890							
H.W. Wide	Upgrade office equipment			1475		4000							

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

ATTACHMENT C

CFP 5-Year Action Plan		
X Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
OK006-1,2&3	PHA Wide	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)

Operations	130,000.	2001
Replace Heat & Air in 140 untis @ \$2,500	350,000.	
Replace cracked, low or dislocated walks and parking areas, 8750 sq.ft., includes special accommodates.		
	45,000.	
Replace Sewer Lines	5,200.	
Replace Kitchen Cabinets in 40 units	152,000.	
Replace water heaters in 50 units	11,250.	
Replace ranges and refrigerators; 14 each per year		
Replace plumbing & electrical fixtures and miscellaneous hardware, replace doors, door hardware, light fixtures, vent hoods, smoke detectors, switches, receptacles, circuit breakers, etc as needed on 140 units	30,000.	
Replace roofs as needed 40 units		
Upgrade maintenance equipment	161,550.	
Upgrade office equipment (\$4000 year)	150,000.	
	65,000.	
	20,000.	

Total estimated cost over next 5 years	\$1,120,000.00	
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PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History

- A. Amount of PHDEP Grant \$** _____
- B. Eligibility type (Indicate with an "X")** ☐ N1 ☐ N2 ☐ R _____
- C. FFY in which funding is requested** _____
- D. Executive Summary of Annual PHDEP Plan**

In the space below provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

12 Months _____ **18 Months** _____ **24 Months** _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place “GE” in column or “W” for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995						
FY 1996						
FY 1997						
FY1998						
FY 1999						

Section 2: PHDEP Plan Goals and Budget**A. PHDEP Plan Summary**

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY _____ PHDEP Budget Summary	
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 – Reimbursement of Law Enforcement	Total PHDEP Funding: \$
Goal(s)	
Objectives	

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHED P Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9115 - Special Initiative					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9116 - Gun Buyback TA Match					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9120 - Security Personnel					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9130 – Employment of Investigators					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9140 – Voluntary Tenant Patrol					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9160 - Drug Prevention					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators

1.							
2.							
3.							

9170 - Drug Intervention					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9180 - Drug Treatment					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Required Attachment D: Resident Member on the PHA Governing Board

1. ☒ Yes ☐ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board:

Barbara Burton

B. How was the resident board member selected: (select one)?

☐ Elected

☒ Appointed by the Mayor of the City with the advice and consent of the Council according to state law

C. The term of appointment is (include the date term expires): October 16, 1989-July 5, 2003

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

- ☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
- ☐ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
- ☐ Other (explain):

B. Date of next term expiration of a governing board member: July 5, 2003

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Honorable J.D. Smith, Mayor of the City of Broken Bow.

Required Attachment:E Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Barbara Burton
Mary Gibson
Jesse Corcoran
Vicki Praytor
Wendy Anderson

Attachment F: Comments of Resident Advisory Board & Explanation of PHA Response

The Public Hearing for the Agency Plan for the Broken Bow Housing Authority was held in the Community Room at the Housing Authority Friday, March 30th, 2001, at 7:30 p.m. Those Attending were; Executive Director, Frank Meddock, Wendy Anderson, Vicki Praytor, Keith & Connie Turpin, William & Katherine Stevens, Scott Brumley, Midge Moore, Howard Minor, and Leon Johnson.

The Director furnished copies of the proposed annual plan to all members present. The Director began by telling everyone present that the purpose of the Public Hearing was to review the proposed plan and to receive comments and/or suggestions that may improve the HA's operation in it's objective of providing decent, safe and sanitary housing with a suitable environment, affordable to low income families.

The Director reviewed the Agency Plan with the residents. He noted that the agency had not made any major changes in the plan from last year, and went on to talk about the Quality Housing Work Responsibility Act (QHWRA), passed in 1998. This new law says that if the head of household is not disabled or working full time (35 hrs per week), they must perform 8 hrs per month of community service. The director also said that if the head of household is full time employed, and a second adult member of the household goes to work, the HA will not count any of the second wage earners income for 1 year and after that 1 year the second wage earner will get a 36% deduction on income earned.

The Director talked about how the HA was tightening up on the screening of applicants according to the plan.

Question:

Leon Johnson asked what classifies a full time student?

The Director said a full time student is anyone who is carrying at least 12-college credited hrs. a semester. He added that a full time student also receives an 18% discount on any income earned.

Comments:

Katherine Stevens suggested planting more of a certain kind of tree that did well during our recent ice storm.

The Director said that we would look into what kinds of trees would be best to plant.

Midge Moore suggested that we make the house numbers easier to read for people who make deliveries.

The Director said the PHA would make this an objective for the next year.

William Stevens made the comment that we need to work on the sidewalks to make them more accessible for people in wheelchairs.

The Director agreed with Mr. Stevens about the sidewalks needing to be more accessible to people in wheelchairs. He further noted that accessibility would be in this budget and in the coming budget for the next several years.

The Director thanked everyone for their comments and suggestions and said that the PHA would keep them all in mind when making the budget.